# NFIP REPETITIVE LOSŠ UPDATE WORKSHEET (AW-501)

THE INFORMATION ON THIS FORM IS BASED ON CLAIMS ON OR BEFORE:(mm/dd/yy)													/y)			
REPETITIVE LOSS NUMBER:																
									Internal Use	Only		\	N/A		FRR	
NFIP COMMUNITY NAME:												CI	CID#:			
		PERTY IDENTIF										<u> </u>				
CURRENT PROPERTY ADDRESS									PREVIOUS PROPERTY ADDRESS/COMMUNITY ID #							
LAST	CLAIMAI	NT:														
INSURED: NAMED INSURED:																
DATE	ES OF I	LOSSES:			1			TOTA	AL NUMBER	OF	LOSSE	S FC	R PRO	PERT	<b>Y</b> :	
					RE	QUE	STED	UPD	ATES							
MARK ALL UPDATES BELOW THAT APPLY (IMPORTANT – SEE INSTRUCTIONS)																
														,		
1.		MATION PR														
		se this update if n below.	all atter	npts to loc	cate the pro	perty fai	il. Please	describe	the steps you t	ook to	locate the	prop	erty in the	comme	nts	
2.		ETIC CHANG														
		e the address s ier such as a Ta			or add your	r local all	ternative p	roperty								
3.		ERTY NOT IN se this update if							is not lessted i	n vour	oommuni	ty DI	oooo provi	do tho d	orroot	
	comm	unity name and	if know	n the NFII	P Commun	ity ID Nu	ımber. If a	vailable,	please attach a	map s	showing t	he pro	operty loca	tion.	correct	
	ASSIGN TO COMMUNITY NAME: NFIP C									MUNI	ITY ID#					
	Abbigi	V 10 COMMO	NII I I						_ \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	IVICIN	ППШπ				-	
4.		PROTECTION OF THE PROTECTION O														
	Choose this update only if some type of structural intervention has occurred to the building, property or the source of flooding that protects the building from future events similar to those that occurred in the past. The correction must be supported by documentation such as an											otects the n				
	Elevation Certificate and the Mitigation information below must be provided.															
	Mitigation Action 1.) Source of Mitigation Funding 3.)															
					J		,					Ū	, —			
5.		ILDING ON I								ı						
	Choose this update only if the property in question can be positively identified as the site of the previously flooded building and documentation is available to support that an insurable building no longer exists at this site. The correction must be supported by documentation such as a															
		lition or Relocat										,				
	Mitig	ation Action 2.	)	Sourc	e of Mitig	ation Fu	unding 3.)		Additional	Sourc	e of Fund	ding 3	3.)			
					Soo An	nronriat	to Mitigati	on Actio	n and Funding	. Codo	ve.					
					See Ap	ргорпа	ie wiitigati	OII ACTIO	ii anu runum <u>y</u>	Code	<u>:5</u>					
6.	DUPLICATE LISTING WITH RL NUMBER: COMBINE AS ONE LISTING.  Choose this update to identify two or more separate listings that are for the same building. List all other RL numbers that are duplicates to this property. Please indicate which address shown is the correct address to use.															
7.	HISTO	RIC BUILDI	NG: (	hoose th	is update	if you l	know the	building	g is listed on a	Stat	e or Nati	onal	Historic 1	Registi	y.	
٨٥٥١٣					•	-								-		
AUUII	IONAL C	OMMENTS: _														

A SIGNED RL TRANSMITTAL SHEET MUST ACCOMPANY THIS FORM FOR APPROVAL OF THE UPDATE!

## **MITIGATION ACTION CODES**

- 1.) If you checked the box that says "FLOOD PROTECTION PROVIDED," please enter the letter below (a –f) that best describes the situation:
  - a. The building was elevated to or above the Base Flood Elevation (BFE).
  - b. The building was elevated but not to the BFE.
  - c. The building (non-residential) was floodproofed to the BFE.
  - d. The building was partially floodproofed (but, not to the BFE).
  - e. The building was protected by a flood control/stormwater management project.
  - f. The building was replaced by a new elevated/floodproofed building.
- 2.) If you checked the box that says "NO BUILDING ON PROPERTY," please enter the letter below (g i) that best describes the situation.
  - g. The building was demolished, but not acquired through any program.
  - h. The building was acquired and demolished as part of a program.
  - i. The building was relocated out of the floodplain.

### MITIGATION FUNDING CODES

3.) Please choose one of the following that best describes the funding source for the mitigation action described by a – i above.

#### **FEMA PROGRAMS**

- j. Hazard Mitigation Grant Program (HMGP).
- k. Flood Mitigation Assistance Program (FMA).
- I. Pre-Disaster Mitigation Grant Program (PDM).
- m. Section 1362 Acquisition Program.
- n. Other FEMA Programs

#### OTHER FUNDING SOURCES

- o. Increased Cost of Construction (ICC) coverage.
- p. U.S. Housing & Urban Development (HUD) Community Development Block Grant (CDBG).
- q. U.S. Army Corps of Engineers or Natural Resources Conservation Service (NRCS) Project.
- r. Other Federal Program.
- s. State Program.
- t. Local Program.
- u. Property Owner
- v. Natural Disaster or Fire.
- w. Unknown

OMB Statement: The CRS Application worksheets, the CRS Coordinator's Manual, and this form have been approved by the Office of Management and Budget (OMB) under the provisions of the Paperwork reduction Act of 1980 as amended, 44 U.S.C. 3501 et seq. And assigned OMB control number 3067-0195. Public reporting burden for the CRS is estimated to average 30 hours. The burden estimate includes the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed and completing and reviewing all CRS forms. Send comments regarding the burden estimate or any aspect of the application, including suggestions for reducing the burden to: Information Collections Management, Federal Office of Management and Budget, Paperwork Reduction Project (3067-0195) WASHINGTON, DC 20503

Privacy Act: Under the Privacy Act (5 U.S.C.552a), personal identifiers, such as names, may be used only for limited purposes. One of the allowable uses of names and flood insurance policy numbers is to analyze the effectiveness of local flood loss reduction efforts. Communities may use personal identifiers for this purpose only and are prohibited from using them for solicitation, or other reasons.